



BOROUGH OF DAVENTRY

ANNUAL REPORT

of the

MEDICAL OFFICER OF HEALTH

FOR THE YEAR 1967




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DAVENTRY BOROUGH COUNCIL

HEALTH DEPT.
MOOT HALL,
DAVENTRY,
NORTHANTS.

Telephone: Daventry 2172

To His Worship the Mayor, Aldermen and Councillors,
of the Borough of Daventry,

I have the honour to present my twelfth Annual Report, incorporating that of the Public Health Inspector on the health and sanitary circumstances of the town.

The report serves two functions. The first to give an annual assessment of the environmental factors relating to health together with the statistics and secondly to record some observations on general trends relating to community health as a whole. The latter also gives some advice on factors which are becoming inimical to the health of the community.

The fifth year of planning and expansion of the town has continued apace. During the year 281 houses were completed for overspill families, and at the end of the year a further 718 were under construction. Thus the housing programme for overspill families continued to gather momentum. Closure of unfit properties proceeded. A number of bungalows for elderly persons were nearing completion at the end of the year. 87 houses were built by private enterprise together with 66 under construction. Full details concerning all aspects on housing are in Section D of this report.

The water supply was adequate and extensions are planned to meet the needs of expansion.

The schemes for dealing with increased flows of sewage were given careful consideration by the Public Health Committee, and a new treatment plant has been planned which will be built to the East of the M.1 Motorway. Details are outlined in Section C of the report.

The swimming pool in its sixth year, remains an ever increasing popular amenity both for the town and the surrounding district. The great majority of schoolchildren in the area have learnt or are learning to swim and it is pleasing to record that there have been no deaths from drowning this year.

The population increase from 6,410 to 6,860, would appear to be small, but as this is the Registrar General's mid-year figure, by the end of the year the actual figure was probably in the region of 7,500. Births rose from 122 to 131, giving a crude rate of 19.0 (S.R. 18.8) compared with the national figure of 17.2.

There were 94 deaths an increase of 14 on last years figure of 80, giving a crude rate of 13.7 (S.R. 10.4) compared with the national figure of 11.2. Causes of death remain similar to last year, and are either due to diseases of the heart and circulation or the cancers, which occur predominantly in the elderly. However 26 died before the age of 65.

Infectious diseases showed a satisfactory decrease there being only 55 notifications compared with 99 last year and 212 in 1965. It remains necessary however to remind parents that in order to maintain this low incidence of infectious disease a high standard of immunisation must continue. The town has a good record for a high level of immunisations,

and though no longer able to obtain the local figures I have every reason to believe that this standard is maintained. I wish to thank the general practitioners, nursing staffs and all those who are concerned for their co-operation in this necessary procedure. The parents who are the final arbiters in the decision to have their children immunised continue to respond readily and are thanked for their sensible attitude. All children should be immunised to diphtheria, whooping cough, poliomyelitis, tetanus and smallpox, not forgetting the necessary booster immunisations particularly before school entry. The thirteen year old children are also vaccinated against tuberculosis.

It is particularly gratifying to record no cases of dysentery or food poisoning during the year. Elsewhere the incidence of these two diseases is far too high, and in the majority of cases is caused by faulty methods of food handling. The need for the strictest standards in the sale, and preparation of food cannot be too strongly emphasised. Food premises of all types are regularly inspected and food handlers advised to conform to scrupulous methods.

The town continues to be aware of the needs of the elderly. The Council has and continues to provide excellent housing accommodation: voluntary organisations are working increasingly for their welfare: our nurses together with the assiduous service provided by our local district welfare officer all contribute to an excellent service in Daventry. The Old People's Welfare Committee continues to fulfil its function of co-ordinating the efforts of the work which is being done by these energetic and public spirited people. Details of their activities are given in the section on the elderly, and our thanks to them for their good work is once again recorded.

During the second year of building the new town proceeded apace. Housing estates were completed and industrial building continued together with the further planning of all the necessary amenities. The new citizens of Daventry will be living in an environment in which there will be carefully planned facilities for the maintenance of good health. These, together with the advances in medical science, and the provisions of the welfare state will provide the community with living conditions which, in theory, should be ideal. It is ironic that when the majority of environmental hazards are removed it is from the nature of man, by his own individual action, that good health, both physical and mental, may still be jeopardised. Each year I re-iterate some of the factors which individuals should consider, both for themselves and for their children, concerning their way of life and how it affects them and the community in which they live. Much ill health and unhappiness is still preventable but this prevention is now less dependent on the environment than on individual action.

The relationship between cigarette smoking and lung cancer, together with chronic bronchitis, and coronary heart disease has now been established and accepted throughout the world. It is unlikely that any member of the community is now not aware of this fact. Yet the habit is not showing any signs of decrease and many young people start smoking each year.

Should this hazard be caused by a failure in protection of the environment so that individuals, as a result of such exposure, would be likely to contract cancer there would be public acclamation that the danger should be removed. When however, the action is dependent on individual rectitude there is little or no response. It would appear to be easy to obtain co-operation when single actions such as attendance for immunisation procedures are necessary but in long term where there is no immediacy of danger and where it is necessary to change a personal habit, which is pleasurable, it would appear to be impossible to succeed.

Again the incidence of early arterial disease, particularly in middle aged males, resulting in coronary artery disease and strokes is showing no decline, and there is some evidence that it is increasing. This problem is arising in all civilised countries. Here again, though many factors are involved, there are two clear indications that the disease is less prevalent in those individuals who take regular physical exercise, and in those who are not obese. Because of increasing transport, sedentary occupation and leisure the need for the taking of regular exercise is lessening. Food is increasingly abundant and intake is often in excess of calorie output. In a primitive society these conditions do not occur. Regular exercise is as needful for health as fresh air and pure water. Again this is a pattern of life, which needs to be incorporated in a way of living and remains at the discretion of the individual.

Deaths from accidents are in the majority preventable on both the road and in the home. Those occurring in the home affect, most often, either young children or the elderly, while those on the road are indiscriminate in their toll. I make further observations, in section B, on these subjects.

Finally it is perplexing that in removing material anxieties from society there is no lessening of mental ill health, either in individual suffering such as neuroses and mental illness or in society as evident by the increase in crime, delinquency, divorce and cruelty to children. Drug taking among teenage children is another disturbing factor. It is to be hoped that in the new town of Daventry, which has previously been a stable environment, that the sturdy citizens will continue to exert their influence and maintain a satisfactorily mentally mature society here.

I wish to express my continued thanks to Mr. Schofield, the Public Health Inspector for his diligent work throughout the year, to those who have contributed to the compilation of this report, to the Chairman and Members of the Public Health Committee for help and encouragement and to the County Medical Officer of Health for his ready co-operation at all times.

JOAN M. ST. V. DAWKINS,
Medical Officer of Health.

August, 1968.

BOROUGH OF DAVENTRY

Members of the Public Health Committee:

Alderman L. B. Butcher (Chairman)

Councillor T. R. Webb (Vice-Chairman)

Alderman G. Williams,

Councillors H. C. Barnsby, H. McConnochie, W. G. Tatcher.

Public Health Officers of the Borough of Daventry:

Joan M. St. V. Dawkins, M.B., B.S., D.P.H., D.C.H.

Medical Officer of Health

Medical Officer of Health Brackley and Daventry Borough Councils and
Brackley, Brixworth, Daventry, Northampton and Towcester Rural
District Councils, Senior Assistant Medical Officer of Health
Northamptonshire County Council.

Also Acting Medical Officer of Health (from October 1st) Higham Ferrers
Borough, Oundle, Raunds and Rushden Urban District Councils,
Thrapston and Oundle Rural District Councils.

Ikram.ul Majid. M.B., B.S., D.P.H.

Deputy Medical Officer of Health (since May).

G. N. Schofield, R.S.I.J.B., M.A.P.H.I., Public Health Inspector

Certified Inspector of Meat and Foods

Shops Act Inspector

Petroleum Officer

SUMMARY OF VITAL STATISTICS 1967

Area (in acres) 3,633; Population 6,860; Number of separate dwellings occupied 2,518; Rateable value 1967 (April) £311,877; Product of a penny rate £1,520.

LIVE BIRTHS (Rate per 1,000 estimated population)

	Male	Female	Total	Rate	Rate for England & Wales
Legitimate	54	72	126		
Illegitimate	4	—	4		
	58	72	130	19.0	17.2

(S.R. 18.8)

ILLEGITIMATE LIVE BIRTHS (Per Cent of total live births)

Male	Female	Total	
4	—	4	3.07

STILL BIRTHS (Rate per 1,000 live and still births)

Male	Female	Total		
1	—	1	8.0	14.8

TOTAL LIVE AND STILL BIRTHS

Male	Female	Total
59	72	131

INFANT DEATHS (Deaths under 1 year)

Male	Female	Total
1	1	2

INFANT MORTALITY RATES (Rate per 1,000 live births)

	Male	Female	Total		
Legitimate	1	1	2	15.0	18.3
Illegitimate	—	—	—		

NEO-NATAL MORTALITY RATE (Deaths under 4 weeks per 1,000 live births)

Male	Female	Total		
—	1	1	8.0	12.5

EARLY NEO-NATAL MORTALITY RATE (Deaths under 1 week per 1,000 live births)

Male	Female	Total		
—	1	1	8.0	10.8

PERINATAL MORTALITY RATE (Stillbirths and deaths under 1 week combined per 1,000 live and still births)

Male	Female	Total		
1	1	2	15.0	25.4

MATERNAL MORTALITY (Including abortion) Nil DEATHS (All causes)

Male	Female	Total		
48	46	94	13.7	11.2

(S.R. 10.4)

CAUSES OF DEATHS AT DIFFERENT PERIODS OF LIFE DURING 1967

CAUSE OF DEATH	Sex	Ages in Years																
		Total all Ages	Under 4 weeks	4 weeks & under 1 year	1	5	15	25	35	45	55	65 & over						
1. Tuberculosis, Respiratory ...	M	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—
	F	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
10. Malignant neoplasm, stomach ...	M	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	F	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
11. Malignant neoplasm, lung, bronchus ...	M	5	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	F	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
12. Malignant neoplasm, breast ...	M	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	F	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
13. Malignant neoplasm, uterus ...	F	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
14. Other malignant and lymphatic neoplasms	M	4	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	F	5	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
17. Vascular lesions of nervous system ...	M	8	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	F	12	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
18. Coronary disease, angina ...	M	8	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	F	6	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
19. Hypertension with heart disease ...	M	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	F	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
20. Other heart disease ...	M	8	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	F	14	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
21. Other circulatory disease ...	M	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	F	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
23. Pneumonia ...	M	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	F	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
26. Ulcer of stomach and duodenum ...	M	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	F	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
27. Gastritis, enteritis and diarrhoea ...	M	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	F	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
28. Nephritis and nephrosis ...	M	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	F	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
32. Other defined and ill-defined diseases ...	M	6	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	F	3	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
33. Motor vehicle accidents ...	M	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	F	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	M	48	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	F	46	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	M	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	F	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	M	8	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	F	5	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
TOTAL ALL CAUSES		46	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	M	11	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	F	9	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	M	20	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	F	28	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—

SUMMARY OF VITAL STATISTICS OVER PREVIOUS 5 YEARS

Year	Estimated	Births		Deaths		All ages	
		No.	Crude Rate	Under 1 No.	1 year Rate	No.	Rate
1963	6060	103	17.0	1	9.7	73	12.04
1964	6130	101	16.48	1	10.0	91	14.84
1965	6280	119	18.15	—	—	64	10.2
1966	6410	124	19.4	2	16.1	80	12.48
1967	6860	130	19.0	2	15.0	94	13.7
			(S.R. 18.8)				(S.R. 10.4)

SECTION A

NATURAL AND SOCIAL CONDITIONS

AREA

The acreage of the town is 6,633 and the population is now 6,860.

Daventry received its Charter as a Borough from Queen Elizabeth I in 1576, and is, therefore, one of the Ancient Boroughs. During the 16th and 17th centuries it became a busy coaching centre, which provided the main industry of whip making. With the disappearance of the coach, employment came from the boot and shoe industry, augmented later by the B.B.C. transmitting station at Borough Hill.

During this period, the character of Daventry changed little, with its wide rural boundaries and its central rather cramped area. However, since 1953-54 when the large tapered roller bearing factory of British Timken was established to the north of the town, the population has steadily increased and the character of the town is changing. The old town remains, but virtually a new town with well spaced modern dwellings has been built in the north and south. Now with the decision of acceptance as an overspill town for the people of Birmingham, the town's growth will be considerable and the prospect is a stimulating one.

POPULATION

The estimated mid-year population calculated by the Registrar General was 6,860 representing an increase of 450 on the 1966 figure. Natural increase, excess of births over deaths was calculated to be 36.

BIRTHS

Live births numbered 130 giving a rate of 19.0 (S.R. 18.8) per 1,000 live births. The national rate is 17.2.

INFANT DEATHS

Two deaths were recorded during the year.

STILLBIRTHS

There was one stillbirth.

ILLEGITIMATE BIRTHS

Four illegitimate births took place during the year two more than in 1966.

MATERNAL MORTALITY

No maternal deaths were recorded during the year.

DEATHS

This year, as for the previous year, the Registrar General has listed the causes of death in groups of under one year, then 1-5 years, and thereafter in decades to 75 and over. Male and female deaths are also shown.

The vital statistics for the year show that there were 94 deaths compared with 80 the previous year, giving a crude rate of 13.7 compared with 12.48 for 1966. The Standardised Rate was 10.4 compared with that for England and Wales of 11.2. The Standardised Rate is calculated from the Registrar General's comparability factory (0.76), which makes allowance for age and sex distribution of the population in different areas, and is adjusted specifically to take into account any residential institution in the district, especially of the aged, which applies particularly in this area.

This year, nationally, the number of deaths from cancer of the lung

has increased, statistics also show an increase in a lower age group. Locally, the figure has risen from 2 to 5. Males still predominate but females are catching up due to the increase in the number of female cigarette smokers. In 1929, 2,715 died from cancer of the lung, in 1939, 6,214, in 1963, 24,434, in 1965, 26,399, in 1966, 27,013 and in 1967, 28,250 there being 23,546 males, 4,704 females.

The relationship between heavy cigarette smoking and cancer of the lung has been well established. It can also contribute to other chest conditions such as chronic bronchitis and may be an adverse factor in coronary heart disease. Yet each year thousands of young people start to smoke and many others continue to indulge in heavy cigarette smoking. The efforts of health education would appear to be having little success. It may be easy to achieve a public response to single and immediate request such as attendance for immunisation but to succeed in long term influence is another matter. In trying to prevent lung cancer we are asking for a sustained effort over many years so that habits are inculcated which will reduce a risk which has no apparent immediate effect. Our aim must however continue to be directed by all means at our disposal, towards young people in an endeavour to prevent them from initially acquiring the smoking habit. Those whom children admire, and therefore emulate have a responsibility to show by their example that cigarette smoking is a foolish habit. Parents, teachers, youth leaders, sportsmen, actors, pop stars and all those whom the young may follow need to realise how considerable is their own influence and example in this respect.

The emergence of early degenerative disease of the arteries is now becoming significant especially among middle aged males. These men in their prime and at a time of their greatest contribution to society are often killed or crippled by coronary thrombosis or strokes. This disease which now assails all the highly developed communities is a challenge which is not being met. The majority of individuals are unaware of the dangers of a pattern of life, assumed in early adulthood and followed without change until the cataclysm strikes them. The causes remain unsolved, and the factors involved are probably multiple. However, one salient feature is apparent, and this is a simple one that early arterial disease is less evident in those who take regular physical exercise. Today with mechanisation of industry, the widespread use of motor vehicles, entertainments which require no physical participation, particularly the almost universal use of television together with an increase in the number of workers whose work is almost entirely sedentary, the proportion of people who have adequate exercise is declining. It is therefore wise to establish the habit of being as physically active as possible starting after leaving school and continuing throughout life with suitable modification to the years. While at school the emphasis is on team games, and many children fail to continue their activity after leaving school. However, swimming, squash, golf, fishing, sailing, walking, dancing, horse riding and gardening are all activities that can be continued either alone or with small groups, and some of these suitably adapted may go on throughout life. The daily walk especially if demanded by a dog, thus ensuring its regularity is specially recommended as this is an activity which can be pursued to old age. This together with the need to exercise some moderation in the consumption of food, to watch against obesity and the endeavour to maintain a benign and tolerant attitude to life and labours may indeed help to avert an early onset of arterial degeneration.

A small decline of approximately 9% can be reported in deaths from road accidents and this is attributed to the introduction of the breathalyzer test. In 1967, 7,487 people died as a result of accidents on the road compared with 7,985 in 1966. Since the beginning of the century, road accidents in Great Britain have caused over 300,000 deaths. Thus on an average day 20 people die as a result of such an accident, one

road user being killed nearly every hour. Analysis by age has shown the 15-26 age group, males predominating, and is most probably due to the temperamental failure of this age group. The necessity of proper maintenance of the vehicle, habitual use of safety devices such as belts in cars and helmets for motorcyclists, and driving with due consideration for the safety of other road users is stressed.

Confirmed figures regarding accidents in the home, for 1967 have not yet been published, but provisional figures indicate a general worsening of the situation. Falls constitute by far the most frequent cause of accidental death in and around the house, about 59 per cent of the total. Nearly 90 per cent of these fatalities were to people in the age group 65 and over. The next most common cause was poisoning followed by burns and scalds, and finally suffocation and choking. Attention to details such as fire guards, fire resistant materials for children's night-dresses, simple structural alterations in houses for elderly people and provision of physical aids, keeping medicines under lock and key, are required to prevent these deaths.

The respiratory infections still take their toll, though less than formerly. The great majority of deaths from pneumonia are in those whose health is undermined by other causes and is as such only a terminal event. There were 2 deaths from pneumonia, and 1 from tuberculosis.

SECTION B

GENERAL PROVISIONS OF HEALTH SERVICE

LABORATORY SERVICE

The Emergency Public Health Laboratory Service is available for work in connection with the diagnosis and control of infectious diseases. It is situated adjacent to Northampton General Hospital. The co-operation and able service which is always provided is greatly appreciated.

AMBULANCE SERVICE

General medical, surgical and infectious disease cases are moved by the Ambulance Service operated by the County Council.

TREATMENT CENTRES AND CLINICS

An Infant Welfare Clinic is held in Daventry on the first and third Friday of each month at the Foundry Hall.

A Mobile Dental Clinic visits the schools periodically.

TUBERCULOSIS

Cases suffering from tuberculosis are treated at Creaton or Rushden hospitals.

The Tuberculosis After-Care Committee continued to serve both the Borough and the surrounding Rural District.

A chest clinic is held at fortnightly intervals at the Danetre Hospital, and continues to be of great service to local patients.

NURSING AT HOME

Health Visitors, District Nurses and Midwives are provided by the County Council. The Services of a permanent full-time Health Visitor, in the town is much appreciated.

HOME HELP SERVICE

This service is also provided by the County Council, and is of particular value both in illness, domiciliary maternity cases and for old people who may, with the assistance of a home help, remain at home rather than be sent to an institution.

HOSPITAL SERVICE

All infectious disease cases, excepting only tuberculosis sufferers, are treated at Harborough Road Isolation Hospital, Northampton, while general medical and surgical cases receive treatment at Danetre Hospital, Northampton General Hospital or Hospital of St. Cross, Rugby.

NATIONAL ASSISTANCE ACT 1947 Section 47 (Amendment 1951)

No action was necessary under this Act during the year, though a number of old people were visited in their homes. In some cases hospital admission was arranged and accepted voluntarily without having recourse to Section 47.

SERVICES FOR OLD PEOPLE

The following provided services for old people:—

1. **The National Health Service**
 - (a) General Practitioner
 - (b) Hospital and Specialist Services including the Almoner Service.
2. **The County Council**
 1. District Nurses
 2. Health Visitors
 3. Home Helps
 4. Certain home equipment where necessary

(b) **The Welfare Department**

1. Part III accommodation and homes
2. Special services for blind, etc., and home fittings where necessary.
3. **The National Assistance Board**
Financial help where necessary.
4. **The Borough Council**
Homes for the aged, including bungalows and flats.
5. **Voluntary Organisations**

The voluntary organisations are particularly active in this area, and provide many services which include Meals on Wheels, Darby and Joan Clubs, chiropody, home visiting and holiday schemes. A report on the activities of the voluntary services follows:—

DARBY & JOAN CLUB

This club has been very active during the year and has held Club Meetings each Friday with the exception of holiday periods. Meetings are held in the Methodist School room and refreshments are served by W.R.V.S. members who give their time voluntarily to this cause.

The membership of the Darby and Joan has now risen to over 100. A few elderly persons from the villages of Norton and Staverton have been allowed to join the Club because there are no similar organisations in their own communities. The staff of Messrs. Harshaw Chemicals transport these elderly people from Norton into Daventry to the meetings using their own cars. Many outings are arranged throughout the year and a number of local organisations give financial support to the Club.

A Chiropody Service is also run by the W.R.V.S. as agents for the County Council. The Chiropodist attends the Club once each month and also visits the homes of any persons who cannot attend.

The following W.R.V.S. members are in charge of the service:—

W.R.V.S. Centre Organiser — Mrs. L. F. Jones.

Club Leader — Mrs. M. Edwards. Treasurer — Mrs. J. Atkins.

MEALS ON WHEELS

This service is run by the W.R.V.S. and dinners are delivered twice weekly to some 15 old folks in their homes. Both the Borough Council and the County Council make a contribution towards part of the cost of this service and a charge of 1/6 is asked from the recipient of each meal supplied. This service is of great benefit and much appreciated by the old folk.

There was a certain amount of difficulty over the preparation of these dinners but this has now been resolved and these are cooked in the kitchen of the Evelyn Wright Home, which is run by the Welfare Department of the County Council.

DAVENTRY OLD PEOPLE'S WELFARE COMMITTEE

This Committee is primarily concerned in liaising with other local organisations and assisting the elderly in a variety of ways. Visiting is undertaken by its members. In a few cases, gardens have been attended to and a Christmas Parcel scheme resulted in the distribution of over one hundred parcels. The children of the Daventry School, Ashby Road, collected a large amount of food for these parcels and also helped with their distribution.

Everyone is aware of the growing number of elderly people in the community. At present in England and Wales there are 5½

million people aged 65 and more; within the next decade the total will rise to 7 million and by the year 2001 to nearly 7 $\frac{3}{4}$ million. This growth is a direct result of the rising number of births during the late Victorian and Edwardian era, the saving of life from improved living standards and the successful control of infectious diseases. The majority of elderly people can look after themselves, but many are unable to do so. This provides a social complex involving many problems. Though the age of retirement is known often little preparation is made. The need for accommodation will be either in separate dwellings adapted to individual needs, in residential homes, with their families or in their existing homes. Loneliness is the great problem and is far too common, when combined with the need for adequate income the situation is sometimes tragic. The major physical disabilities of old age, arthritis, bronchitis, strokes, heart disease are well known and need special nursing and medical care. Increasing frailty and mental difficulties add to the problem. The community provides certain services but many elderly people fail to avail themselves of these or even know whom to ask for information. The solution of caring for the elderly has yet to be found, and is a task which falls on us all, the elderly people themselves, their families, their neighbours, and voluntary and statutory services.

SECTION C

SANITARY CIRCUMSTANCES OF THE DISTRICT

WATER SUPPLY

The water supply to the town is controlled by the Mid-Northamptonshire Water Board and the Borough Council is a Constituent Authority. The main sources of water are from Pitsford and Ravensthorpe reservoirs which are situated some 12 miles away from Daventry.

The supply has been satisfactory both in quality and in quantity. The water was examined at source before and after treatment; the final water having a residual chlorine content of 1.2 parts per million. A total of 17 samples were collected in Daventry during the year and submitted for bacteriological examination. The results of the analyses were all satisfactory.

In addition 13 chemical analyses were taken by the Board from water supplied to the town. The following is a copy of a recent report.

Northampton and Daventry Distribution Areas Chemical Results in parts per million (Mg/L)

Appearance. Bright with particles.		Free Carbon Dioxide	2
pH	8.1	Dissolved solids dried at 170°C	335
Electric Conductivity (Reciprocal Megohms per cm)	470	Alkalinity as Calcium Carbonate	120
Chlorine present as Chloride	28	Carbonate hardness	120
Total Hardness	170	Calcium	52
Non-carbodate hardness	50	Silica	1
Magnesium	9.7		

Iron, zinc, copper, lead manganeses, normally absent.

All houses enjoy a main supply with the exception of a few isolated farms and agricultural cottages which have their own spring or well water supplies. No shortage was found in any of these particular cases.

Proposals have been made by the Water Board to give an increased supply to Daventry to meet the needs of town expansion. These include the laying of a new main from Pitsford terminating at Weedon but this will jointly serve other parts of Northampton. A 27 inch diameter main will be laid from Weedon to supply a new six million gallon service reservoir to be built upon Newnham Hill. In addition a 33 inch diameter ring main will be provided for the town to facilitate distribution to the new industrial and housing sites being developed. Under the circumstances it is expected that there will be adequate water for all demands, however, with the increased overall consumption for the area now running at 50 gallons per head daily the main sources may be strained to keep abreast of requirements throughout the county.

No fluoride determinations have been carried out during the year and the water is not liable to plumbo-solvent action.

DISINFECTION AND DISINFESTATION

Arrangements were made for disinfection of premises in a few instances, also a small number of articles were treated or removed for destruction.

A number of insect problems were investigated and dealt with, by the use of Gammexane, D.D.T. or other insecticides. These treatments

are usually carried out free at dwelling houses, although a charge is made in respect of this work when carried out at business premises. Twenty wasps nests were reported to the department and these were destroyed.

SEWERAGE AND SEWAGE DISPOSAL

The present sewage treatment works situated on the east side of Welton Road are only 1 mile from the centre of the town. They are to be replaced by a new scheme to meet the future growth of the town and will be located 4 miles from Daventry. This siting will ensure that the works are not subsequently enveloped by housing developments. The proposals involve placing sewers under the M.1 Motorway and a site of 49 acres is to be acquired for this purpose. It is expected that the works and main trunk communicating sewer will take up to 3 years to construct at a cost of 1½ million pounds. The effluent will discharge into a tributary of the river Nene. In the meantime the present works are being utilised along with temporary land irrigation areas to effect treatment of the sewage.

On the 1st April, 1967 work commenced upon the Drayton Outfall sewers comprising of a main storm water culvert of a sectional area of 8 feet x 6 feet and a 30-inch diameter foul sewer. The construction of these sewers was brought forward to provide sufficient sewerage service to the Royal Oak Industrial Areas upon which the new Ford and Herbert-Ingersoll factories were being built. It is planned to construct a Stilling Pond at the head of the Daventry Reservoir to provide a treatment area for the increased flow of storm water into the reservoir and for other works to carry the water from the point of outflow to the watercourses leading into the actual head-water of the River Nene.

In order to deal with the increase in trade waste effluent from factories a part-time officer was employed and a system of routine inspections was undertaken for this purpose.

During periods of heavy rain the existing sewer running under London Road surcharges. When this happens an overflow discharges storm and foul drainage into the nearby stream. This is very unsatisfactory as it leads to pollution of an area frequented by children. The trouble will fortunately be overcome when the branch sewers which converge in London Road are linked into the recently completed Southern trunk sewer. These connections, should therefore, be carried out as soon as possible.

RODENT CONTROL

A free service was given for dwelling houses while a charge was made for rodent control work at factories and other business premises. Four factories and six schools were under annual contract. Surveys and treatments were undertaken at factories and shops acquired by Daventry Development Committee in the Central Area.

There was an increase in the number of complaints of trouble with rats and mice, although most of these were of a minor nature.

Treatment was carried out upon the sewers against rats. Following baiting upon 42 main inspection chambers 4 were found to be infested. These chambers had recently been constructed upon housing sites where extension of the sewers was in progress.

Permanent baiting and treatment was carried out upon the Council's refuse tip, and this proved very satisfactory in preventing any increase in the number of rats upon the tip, where there is obviously a readily available source of food.

ANNUAL REPORT OF RATS AND MICE
Prevention of Damage by Pests Act, 1949

	Non-agricultural	agricultural
1. Number of properties in district	3,160	21
2. (a) Total number of properties (including nearby premises) inspected following notification	70	1
(b) Number infested by (i) rats	38	1
(ii) mice	9	—
3. (a) Total number of properties inspected for rats and/or mice for reasons other than notification	98	6
(b) Number infested by (i) rats	13	2
(ii) mice	—	—
4. Sewers		
(a) Inspection chambers surveyed	... 42	
(b) Number found to be infested and dealt with	... .. 4	

REFUSE COLLECTION

This service is carried out at weekly intervals and the refuse disposed of at the Tip at Dodford. The tip is partially covered and is under treatment for rodents. Spraying is carried out against flies in summer.

The Public Health Committee visited a Refuse Puvorisation Plant during the year to study this method of disposal. The plant breaks down the amount of refuse and therefore saves on tipping space but is rather costly for populations of less than 20,000.

Metal dustbins are supplied by the Council upon request from householders, at a charge of 7/6 per annum. Thirty-one more bins were supplied during the year, although a number of bins were withdrawn from property in the Central Area which became vacant. Altogether a total of 150 dustbins are in use under the scheme.

COMMON LODGING HOUSES

There were no premises registered for this purpose.

MOVABLE DWELLINGS

One licence was issued permitting a caravan to be used for living accommodation throughout the year.

There were a number of caravans on the building sites. These were used by workers transferred into the town on building projects. Visits were made to these sites in order to ensure that adequate water and drainage was available.

ANIMAL BOARDING ESTABLISHMENTS

There is one Animal Boarding Establishment which was licensed by the Borough Council. The standard of the premises and general welfare of animals kept was very good indeed.

SWIMMING BATHS

There is a modern open air swimming pool in the town. This is situated along Ashby Road and has a pleasant area of land surrounding the pool. There is also a paddling pool for smaller children.

The water is heated by electricity and treatment is by pressure filters with a turnover period of four hours plus chlorination and chemical treatment. Regular samples were taken of the water from the pool and these were entirely satisfactory.

A further pool was planned and will be opened during the coming year. This pool will be mainly for learners and will therefore ease the pressure on the main pool during busy periods. The number of bathers is continually increasing and on one day, no less than 2,400 persons attended.

PETROLEUM REGULATIONS

Twenty-three premises were used for the storage of petroleum during the year and were licensed by the Council for this purpose.

One new storage installation was constructed and brought into use at Messrs. Fords Factory while an existing garage was re-opened on the A45 to Weedon. This was for Messrs. Daventry Auto-car Limited who were transferring from their central garage in Sheaf Street which will be closed pending re-development of the site. As a safety measure the tanks at these latter premises were water filled when storage ceased. Another garage in Warwick Street also closed and following the removal of the petrol pumps the underground tanks were also filled with water.

One storage tank was pressure tested after being in use for more than 20 years, and this was found to be satisfactory. Such tests are now carried out as a routine measure to ascertain the soundness of existing underground storage tanks as recommended by the Home Office.

ATMOSPHERIC POLLUTION

Plans of new factories were examined in order to ensure that installations of new fuel burning appliances would not be the cause of atmospheric pollution. Observations were given in respect of some of these, especially in respect of points and heights of emission. The designation of industrial sites away from housing areas is of prime importance in obviating hazards to health from smoke and fumes associated with large industries.

In Daventry the pollution from domestic sources is low. All new houses being built for Overspill families are heated by electricity or gas central heating, thus avoiding smoke nuisance.

Several complaints were dealt with concerning the burning of trade waste. In such cases visits were made and improvements effected by interviews with the Management and employees in respect of these problems.

SECTION D

HOUSING

The large scale building programme of houses was mainly for housing overspill families. 281 dwellings were completed during the year. A further 718 were under construction as follows:—

					Dwellings under construction
Headlands Estate	Phase 11	...	...	...	106
Southbrook Estate	Phase 1	...	...	...	179
" "	" 2	...	...	...	194
" "	" 3	...	...	...	239

69 dwellings were also planned for Phase IV development on the Southbrook Estate. The third housing site known as the Grange Estate will be developed shortly; 241 dwellings are included in Phase 1.

The above dwellings consist of houses and flats of the normal two storey type. It is interesting to note that industrial methods of house construction are being extensively used on Phases 2, 3 and 4 of the Southbrook Estate.

The housing schemes provide for new schools. These are under construction and will afford education facilities within close proximity to new housing areas. A shopping centre will also be provided on the Southbrook Estate to cater for local needs.

Steady progress was made with the building programme carried out by the Borough Council. It was anticipated that the first of 30 bungalows in the Kingsley Avenue area would soon be completed. These are intended primarily for aged persons. The need for this type of accommodation is growing as witnessed by the large number of applications received, many from aged persons residing in the central area.

A report was prepared by your Inspector of future housing requirements, including the needs of those families who will be displaced by Central Area re-development. The Housing Committee accepted responsibility for rehousing local families disturbed, and already a number have been offered housing. All these cases require special consideration by the Public Health and Housing Committees to try and give people the type of accommodation they desire and this policy has been very successful.

The Borough Council's trial scheme of selling individual plots to persons to build their own homes commenced satisfactorily, and a number of excellent houses and bungalows were in the course of erection along Ashby Road.

A flatlet scheme with Warden accommodation was planned by the Housing Committee for the area of land at Greenhill Crescent on the Headlands Estate. There is a special need for such a home as this type of accommodation is ideal for elderly persons who cannot do much housework and yet do not want to give up the independence of having their own homes. In addition many houses can be released for occupation by younger families with children by the building of these flatlets for aged tenants.

Private houses were being built on six sites in various parts of the Borough and this development lends contrast to the Municipal Schemes. 87 dwellings were completed and 66 more were under construction at the end of the year.

The assistance given by the Divisional Estates Department has been very helpful in the closure of houses or transfer of families within the central area in respect of dwellings which they have acquired. All houses to be relet in the central area are surveyed by your Inspector and repairs carried out before re-occupation by families nominated by the Housing Committee.

Three houses were demolished and ten more closed during the year. A survey of vacant houses due for demolition was made in October, 1967. The result showed there were 107 buildings in this category. 50 of these structurally unsafe. As most of these had been acquired by the Development Committee during the past three years, representations were made by the Public Health Committee for an early start to be made upon the demolition of these buildings during the coming year.

Four applications were received for Standard Grants towards modernisation schemes for private property, and these were approved by the Council. Applications are decided at the time of visits to the premises by a Sub-Committee of the Public Health Committee and this method results in applications being dealt with very quickly.

There were no applications for Certificates of Disrepair under the Rent Act, 1957.

The accompanying tables give details of other housing statistics required by the Ministry of Housing and Local Government:

HOUSING STATISTICS

I INSPECTION OF DWELLING HOUSES DURING THE YEAR

1.	(a) Number of dwellinghouses inspected for Public Health or Housing Act defects	124
	(b) Number of inspections made	231
2.	Number of dwellinghouses unfit for human habitation and incapable of repair at reasonable expense:-	
	(a) Number scheduled in original Slum Clearance programme, 1955	117
	(b) Number of additional houses found to be unfit as a result of a re-survey.	77
	(c) Number dealt with 1955-1967	152
	(d) Remaining unfit houses	42

II HOUSES DEMOLISHED

In Clearance Areas

1.	Houses unfit for human habitation	—
2.	Houses included by reason of bad arrangement	—

Not in Clearance Areas

3.	As a result of formal or informal procedure under Sec. 16 or Sec. 17 (1) Housing Act, 1957	3
4.	Local Authority owned houses certified as unfit	—
5.	Houses unfit for human habitation where action has been taken under local Acts	—
6.	Houses included in unfitness orders	—
7.	Number of dwellings included above which were previously reported as closed	—

III UNFIT HOUSES CLOSED

8.	Under Sec. 16(4), 17(1) and 35(1) Housing Act, 1957	10
9.	Under Sec. 17(3) and 26, Housing Act, 1957	—
10.	Parts of buildings closed under Sec. 18, Housing Act, 1957	1

IV NUMBER OF PERSONS DISPLACED

From houses to be demolished in or adjoining clearance areas.	No. of persons ...	—
	No. of families ...	—
From houses to be demolished not in or adjoining clearance areas.	No. of persons ...	20
	No. of families ...	9
From houses to be closed.	No. of persons ...	6
	No. of families ...	2
From parts of buildings to be closed.	No. of persons ...	2
	No. of families ...	1

V UNFIT HOUSES MADE FIT AND HOUSES IN WHICH DEFECTS WERE REMEDIED

	By Owner	By Local Authority
11. After informal Action by Local Authority	48	—
12a After formal notice under Public Health Acts	1	—
12b Sec. 9, 16 and 24 Housing Act, 1957	—	—

VI UNFIT HOUSES IN TEMPORARY USE (Housing Act, 1957) NIL

VII PURCHASE OF HOUSES BY AGREEMENT (in clearance areas) NIL

VIII HOUSING ACT 1957 PART IV — OVERCROWDING

1. (a) Number of dwellinghouses overcrowded at end of year	1
(b) Number of families dwelling therein	2
(c) Number of persons dwelling therein	8
2. Number of new cases of overcrowding reported during the year	1
3. Number of cases of overcrowding relieved during the year	2
Number of persons connected in such cases	12
4. Number of cases in which dwellinghouses became overcrowded again after Local Authority had taken steps to abate same	Nil

RENT ACT, 1957

Number of applications for Certificates of Disrepair ...	Nil
Number of Certificates granted	Nil

IMPROVEMENT GRANTS

(a) House Purchase and Housing Act, 1959 and Housing Acts, 1961 and 1964	
Number of applications for discretionary Grants ...	Nil
(b) House Purchase and Housing Act, 1959 and Housing Acts, 1961 and 1964	
Number of applications for Standard Grants	4
Number of applications approved by Local Authority	4
Number of applications refused by Local Authority	Nil

SECTION E

INSPECTION AND SUPERVISION OF FOOD AND DRINK

Regular visits were made to inspect shops, cafes and canteens where food was prepared for sale. The standard of cleanliness was generally satisfactory although some works were required by your Inspector at several premises, particularly with regard to decoration.

A number of shops in the central area have a limited life due to re-development proposals and while this precludes extensive works it is nevertheless necessary to ensure a good standard of cleanliness and decoration.

Several shops acquired by the Birmingham City Estates department for the Development Committee were re-let. This has led to an improvement in the appearance of the shopping areas which were taking on a rather depressing atmosphere. Close liaison was maintained with the Divisional Estates Officer over re-lettings to secure the most suitable type of trade for any particular premises, with special regard to shops intended for sale of food.

Several complaints were received from members of the public regarding food and all were investigated. The following cases were dealt with:—

1. Foreign matter (iron dust) in milk.
2. Mould in meat paste.
3. Nail in sausage roll.
4. Foreign body in fruit pie.
5. Bristle in bottle of milk.
6. Dried fruit infested with larvae of Cocoa-Moth.

A prosecution was authorised by the Public Health Committee in respect of case No. 3 above and the Magistrates Court imposed a fine of £20 in respect of this offence. Previous warnings had been issued to the firm in question.

On 1st January, 1967 the Markets, Stalls and Delivery Vehicles Regulations came into operation. I outlined the requirements to stall-holders selling food on Market days. Certain facilities have been provided by the Council to meet with these regulations. Due to the number of traders attending the Friday Market certain wares (other than food) had to be laid on the unpaved ground by the side of the Market Square. This is a discredit to the Market as no site should be regularly allocated unless paved.

Several samples of milk were submitted to the Laboratory for testing by the Methylene Blue Test to ascertain the keeping quality of milk. All were satisfactory. Following investigations into the first complaint mentioned above the staff at the Dairy found that the cause of the trouble was due to fine particles of dust being blown into the dairy from a nearby iron foundry. This happened during windy weather when iron dust was carried into milk hoppers which were left open overnight following cleansing. The hoppers are now covered overnight and no further trouble has arisen.

Premises and vehicles used for the sale of ice cream were examined and samples taken. One vehicle was found to be operating without proper washing facilities. This matter was taken up with the firm situated outside Daventry. In addition a report was also sent to the Public

Health Department of the Local Authority from whose area the vehicle operated, and from this liaison, satisfactory results were obtained.

There are no egg pasteurisation plants or poultry processing premises within the Borough.

Several certificates were given to shopkeepers who voluntarily surrendered food for condemnation and disposal. Such persons can usually claim compensation for this food when accompanied by a certificate from your Inspector.

I am pleased to mention that 73 samples of food were taken in the Borough by the Chief Inspector of Weights and Measures. These were all satisfactory and conformed with the appropriate labelling requirements. A total of 3,992 articles were also checked for weight and measure and apart from a few minor deficiencies all were found to be correct.

The following is a list of food premises grouped in categories of trade carried on:—

FOOD HYGIENE (GENERAL) REGULATIONS, 1960

TRADE	Number of Premises	Number of Premises complying with Reg. 16	Number of Premises to which Reg. 19 applies	Number of Premises complying with Reg. 19
Bakehouses	...	3	3	3
Confectioners	...	8	3	3
Grocers (general)	...	16	14	14
Greengrocers	...	4	—	—
Butchers	...	6	6	6
Fish shops	...	2	2	2
Cafes	...	4	4	4
Licensed premises (Hotels, inns and club)	...	11	11	11
Canteens (factories, offices and schools)	...	12	12	12

NOTE. Regulation 16 requires wash basins to be provided.

Regulation 19 requires facilities for washing food and equipment.

SECTION F

PREVALENCE AND CONTROL OVER INFECTIOUS AND OTHER DISEASES

There was a decrease in the incidence of infectious disease from last year's figure of 99 to 55. This was mainly due to the decrease in measles notifications which fell from 78 to 33. Six cases of whooping cough were notified. It is gratifying to record no cases of Sonne dysentery which has been prevalent in the town on occasions in the past. Once again, there were no cases of poliomyelitis and no case of food poisoning.

PERIOD DISTRIBUTION OF NOTIFIED CASES OF INFECTIOUS DISEASE

	January	February	March	April	May	June	July	August	September	October	November	December	Total
Measles ...	12	—	3	3	—	—	5	4	5	—	1	—	33
Scarlet Fever	—	—	—	1	5	—	—	—	—	—	4	1	11
Whooping Cough	—	—	—	—	—	1	2	—	1	—	—	2	6
Tuberculosis (Non-Pulmonary)	—	—	—	—	—	—	—	1	—	—	—	—	1
Infective Hepatitis	—	2	1	—	—	—	—	—	—	—	—	1	4
TOTALS	12	2	4	4	5	1	7	5	6	—	5	4	55

MEASLES

There were 33 cases, a decrease on last year, and again exhibiting the biennial incidence of measles. This disease, though highly infectious, is now like scarlet fever, following a more benign course and seldom showing serious complications. However, in the more delicate, and occasionally in normal children, the unpleasant conditions of eye or ear infections or pneumonia still occur. These are, however, usually soon and effectively dealt with by the large number of antibiotics that are now available. It is probable that a schedule for vaccination will be offered next year.

WHOOPIING COUGH

Six cases were notified. This is another condition which is becoming largely more benign, but in some cases can be distressing, and in infancy, a serious illness. Protection to this disease is often by triple vaccination, together with tetanus and diphtheria. The satisfactory lack of cases is probably due to the high immunisation rate in the town.

SCARLET FEVER

Eleven cases were notified. This disease continues in its mild phase. Its principal interest is that it gives a rough indication of the amount of streptococcal infection in the community.

SMALLPOX

There were no cases. The vaccination of children is still necessary and should be carried out sometime during the first two years of life, preferably between the first and second year.

DIPHTHERIA

There have been no cases of diphtheria in Northamptonshire since 1956. There is therefore, with each successive year of freedom from infection, a diminishing recollection of the dangers of this illness. Mothers without knowledge of the disease feel a false security and may not have their children immunised. That this is a dangerous situation cannot be too strongly stressed, as it is only by keeping up the numbers of children immunised that the disease can be kept in check. It is the duty of all parents to have their children immunised, and if they fail to do so, they neglect their welfare.

POLIOMYELITIS

Once again there have been no cases, and this freedom can be ascribed to immunisation as the decline in incidence has occurred concurrently with vaccination. The oral Sabin vaccine is now used which gives a longer lasting immunity than the Salk or injected variety. A drink of syrup or a lump of sugar is also much more acceptable to the young patients than the previous needle prick.

SONNE DYSENTERY

There have been no cases.

FOOD POISONING

There were no cases. The condition is usually caused by one of the Salmonella organisms, the commonest being the Typhimurium strain or paratyphoid A or B. The Staphylococcus gaining entry to food from an infected spot or boil on the hands, arms or face of a food handler may also be an occasional cause. More rarely typhoid fever or botulism may occur. However, the commonest germ causing food poisoning is the Salmonella gaining entry into food by the faulty hygiene of food handlers. The sources of infection can be numerous, uncooked contaminated (often imported) meat being today, one of the most frequent.

TYPHOID FEVER

There were no cases.

RESPIRATORY INFECTIONS

Two deaths are recorded this year from pneumonia and none from bronchitis and influenza. The respiratory infections are now seldom a cause of death except as a terminal event but remain a considerable cause of ill-health. These are still the highest cause of loss of working hours, and bronchitis, nasal catarrh and sinus infections are still a cause of much disability.

INFECTIVE HEPATITIS

There were four cases. The Minister of Health gave sanction that this disease should be made locally notifiable as from 1st July, 1962. By arrangement with other local authorities this also became operative in Northamptonshire.

Acute infective hepatitis is a disease caused by a virus which attacks the liver and causes jaundice. It is mainly an infection of young people, of faecal-oral spread, with an incubation period of 15-50 days. The incriminative routes of infection are from food-handlers, water and children to their mothers. The virus is present in faeces, 16 days before jaundice and up to 8 days afterwards. Serum hepatitis, which is another

form of infective hepatitis, has a longer incubation period of 50-160 days and affects mainly adults and can be spread by blood transfusion and inefficiently sterilised equipment used by doctors, dentists and nurses, drug addicts and in the various tattooing processes. The clinical groups of these two groups of hepatitis are indistinguishable. There is no specific treatment and jaundiced adults may be away from work from six weeks to two months and sometimes may not feel really fit for a year. Quarantine measures are of little value and patients can be treated at home or in hospital, provided that adequate hand-washing techniques are practised, and concurrent disinfection of excreta. Serum hepatitis could be virtually abolished, if disposable equipment were generally introduced. In the County, disposable equipment is used by the County Health Department for all procedures involving immunisation. Gamma Globulin is of great value for the protection of close contacts and pregnant women during epidemics.

VACCINATION AND IMMUNISATION

Children are offered immunisation to the following diseases: Diphtheria, Whooping Cough, Tetanus, Poliomyelitis and Smallpox in the earlier years. These procedures are carried out by the General Practitioner or by the County Council at their Child Welfare Clinics.

Figures are not available this year, of the numbers immunised in the town. The County Council will include these in their statistics for the year.

All children are offered vaccination against tuberculosis at the age of 13 years. There is a good response to this offer and large numbers are vaccinated each year in the schools.

TUBERCULOSIS

There was one new case of tuberculosis, a housewife aged 23 years, and one death is recorded.

Age and sex distribution of new cases and deaths 1967

Age Groups	New Cases				Deaths			
	Pulmonary		Other		Pulmonary		Other	
	M	F	M	F	M	F	M	F
0-	—	—	—	—	—	—	—	—
1-	—	—	—	—	—	—	—	—
5-	—	—	—	—	—	—	—	—
15-	—	—	—	—	—	—	—	—
20-	—	—	—	1	—	—	—	—
25	—	—	—	—	—	—	—	—
35	—	—	—	—	—	—	—	—
45	—	—	—	—	—	—	—	—
55-	—	—	—	—	—	—	—	—
65 plus	—	—	—	—	—	1	—	—
TOTAL	—	—	—	1	—	1	—	—

Cases on Register at 31st December, 1967

Designation	Males		Females		Total
	Pulmonary	Other	Pulmonary	Other	
Notified in 1967	—	—	—	1	1
Inward Transfers	1	—	—	—	1
Death	—	—	1	—	1
Cured	—	—	—	—	—
Removals	1	—	—	—	—
Remaining	22	4	22	2	50

SECTION G

FACTORIES ACT 1961

Prescribed Particulars on the Administration of the Factories Act 1961 Part I

INSPECTION FOR PURPOSES OF PROVISIONS AS TO HEALTH

	No. on Register	Inspections	Number of Written Notices	Occupiers Prosecuted
(i) Factories without mechanical power ...	11	7	2	—
(ii) Factories with mechanical power ...	39	21	3	—
(iii) Other premises under Act (excluding outworkers' premises)	19	35	4	—
	69	63	8	—

CASES IN WHICH DEFECTS WERE FOUND

No. of cases in which defects were found	Found	Remedied	Ref. to M.H. Insp.	Ref. to H.M.I.	No. of Prosecutions
Want of cleanliness (S.1)	3	3	—	—	—
Overcrowding (S.2)	—	—	—	—	—
Unreasonable Temp. (S.3)	—	—	—	—	—
Inadequate Vent. (S.4)	—	—	—	—	—
Ineffective drainage of floors (S.6)	—	—	—	—	—
Sanitary Conveniences (S.7)					
(a) Insufficient	2	2	—	—	—
(b) Unsuitable or defective	1	1	—	—	—
(c) Not separate for sexes	—	—	—	—	—
Other offences (not relating to Outworkers)	2	2	—	—	—
Total	8	8	—	—	—

Part VIII-Outworkers

Number of outworkers registered during the year ... Nil

OFFICES, SHOPS AND RAILWAY PREMISES ACT, 1963

The report covers the period of 12 months from the 1st January to the 31st December, 1967, and includes details required by Section 60 of the above Act.

Part I—General report upon the enforcement of the Act.

Part II—Statistics Tables.

PART I

REGISTRATION

The number of registrations fell during the year due to the closure of a number of shops in the central area of the town where redevelopment is to be carried out by the Daventry Development Committee.

OPERATION OF THE GENERAL PROVISIONS OF THE ACT

During the year a review was made of occupiers of offices and shops to ensure that current registration details were up to date. This

annual revision appears necessary if an accurate record is to be kept as the number of tenancy changes is considerable and new occupiers do not always remember to register their premises.

The structural condition of many older premises varies from very satisfactory to poor but due to the limited life of shops in certain areas only the minimum amount of repair work is being undertaken at the present time. Other shops not directly effected by development were examined and improvement secured in several instances.

A few complaints were received of conditions being below standard and action was taken by your Inspector to deal with these. A number of shopkeepers were asked to attend to the redecoration of storage and workrooms at the rear of their shops. Heating of premises was generally satisfactory with one or two exceptions, and one feels that the provisions of the Act are gradually becoming better known in all quarters.

Advice was asked for and given in several cases where improvements or new shops were being planned. Close liaison was maintained with the Fire Prevention Department in these matters and their co-operation is appreciated.

No accidents were reported nor were any prosecutions taken during the year.

The general pattern of inspections reveal that improvements are necessary in many cases and some buildings clearly need re-design and possibly rebuilding to bring them up to a modern standard.

PART II

Table A

REGISTRATIONS AND GENERAL INSPECTIONS

Class of premises	No. of premises registered during year	Total registered premises at end of year	No. of registered premises receiving general inspection during year
Offices	—	31	21
Retail Shops	6	43	26
Wholesale shops and warehouses	—	—	—
Catering establishments open to the public, canteens ...	2	8	7
Fuel storage depots	—	1	—
TOTALS	8	83	50

Table B

**NUMBER OF VISITS OF ALL KINDS BY INSPECTORS
TO REGISTERED PREMISES**

142

Table C

**ANALYSIS OF PERSONS EMPLOYED IN REGISTERED
PREMISES BY WORKPLACE**

Class of workplace	No. of persons employed
Offices	239
Retail shops	167
Wholesale departments, warehouses	6
Catering establishments open to the public	37
Canteens	6
Fuel storage depots	2
TOTAL	457
Total males	238
Total females	219

Table D

EXEMPTIONS

Part I — Space (Sec. 5(2))	Nil
Part II — Temperature (Sec. 6)	Nil
Part III — Sanitary Conveniences (Sec. 9)	Nil
Part IV — Washing Facilities (Sec. 10(1))	Nil

Table E

PROSECUTIONS

Nil

Table F

INSPECTORS

No. of inspectors appointed under Section 52(1) or (5) of the Act.	One
No. of other staff employed for most of their time on work in connection with the Act.	Nil

SUMMARY OF PUBLIC HEALTH INSPECTOR'S VISITS DURING THE YEAR

Housing:

No. of inspections made	231
Overcrowding	6
Drainage, W.C.s, Sinks, etc.	20
Miscellaneous Housing Visits	75
Food and Drugs and Ancillary Provisions	53
Food — Inspection and Condemnation	21
Offices, Shops and Railway Premises	142
Petroleum Licensing and Supervision	29
Refuse Collection	11
Refuse Disposal	8
Verminous Premises and Infestations	7
Infectious Disease and Food Poisoning	24
Pig keeping and other animal complaints	6
Nuisances	10
Theatres, Hotels and Places of Entertainment	14
Rodent Control	24
Schools	14
Temporary Dwellings	21

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